

**COFNODION Y CYFARFOD PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD
CYMERADWYO / UNAPPROVED MINUTES OF THE PEOPLE PLANNING &
PERFORMANCE ASSURANCE COMMITTEE MEETING**

Date and Time of Meeting:	17 th December 2020 at 9.00 a.m.
Venue:	Board Room, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

Present:	<p>Professor John Gammon, Independent Member (PPPAC Chair) Mr Owen Burt, Independent Member (PPPAC Vice-Chair) (VC) Cllr. Simon Hancock, Independent Member (VC) Ms Ann Murphy, Independent Member (VC) Mrs Anna Lewis, Independent Member (VC) Mr Maynard Davies, Independent Member (VC)</p>
In Attendance	<p>Mrs Lisa Gostling, Director of Workforce & OD (PPPAC Joint Executive Lead) (VC) Mr Huw Thomas, Director of Finance (PPPAC Joint Executive Lead) Miss Maria Battle, Chair (part) Mrs Ros Jervis, Director of Public Health (VC) (part) Mrs Joanne Wilson, Board Secretary Ms Jill Paterson, Director of Primary Care, Community & Long Term Care (part) Mr Paul Williams, Assistant Director of Strategic Planning (VC) (part) Mr Anthony Tracey, Assistant Director of Informatics (VC) Mr Keith Jones, Director of Secondary Care (VC) Mrs Libby Ryan-Davies, Transformation Director (VC) (part) Mrs Yvonne Burson, Assistant Director of Communications (VC) (part) Mrs Enfys Williams, Welsh Language Services Manager (VC) (part) Mr Sam Dentten, Hywel Dda Community Health Council (VC) Ms Anne Beegan, Audit Wales (VC) Mrs Claire Williams, Committee Services Officer (Secretariat)</p>

Agenda Item		Action
PPPAC (20)72	<p>INTRODUCTIONS AND APOLOGIES FOR ABSENCE</p> <p>Prof. Gammon extended a warm welcome to all, reminding Members that the People, Planning & Performance Assurance Committee (PPPAC) concerns "people" and that in these challenging times, it is important that we recognise and acknowledge the relentless pressure and the hard work that colleagues are undertaking to protect both the population and patients of Hywel Dda University Health Board (HDdUHB). Those colleagues who have been unwell were wished a speedy recovery, with those staff in self-isolation also in our thoughts. Profound sadness was expressed in respect of those colleagues who have not survived COVID-19, in particular Mrs Carol Cotterell, Assistant Director, Operational Nursing & Quality Acute Services. Mrs Cotterell worked for HDdUHB for many years, with her continuous professionalism, high standards and commitment to nursing acknowledged. Sincere condolences were expressed to Mrs Cotterell's family.</p>	

	Apologies for absence were received from Mr Andrew Carruthers, Director of Operations.	
PPPAC (20)73	DECLARATIONS OF INTEREST Cllr. Simon Hancock declared an interest in the Bluestone Resort, advising that should discussion be undertaken in relation to field hospitals, he would withdraw from the meeting.	
PPPAC (20)74	MINUTES OF THE PREVIOUS MEETING HELD ON 29th OCTOBER 2020 RESOLVED – that the minutes of the PPPAC meeting held on 29 th October 2020 be APPROVED as an accurate record of proceedings.	
PPPAC (20)75	TABLE OF ACTIONS AND MATTERS ARISING FROM MEETING HELD ON 29th OCTOBER 2020 An update was provided on the Table of Actions from the meeting held on 29 th October 2020 and confirmation received that all outstanding actions have been progressed with the exception of: <ul style="list-style-type: none"> • PPPAC(20)49 - PPPAC 20(29) Welsh Language Standards: Impact on Workforce Arrangements – to provide Ms Anna Lewis with updated figures in relation to the compliance section of the Welsh Language Standards – Mrs Lisa Gostling confirmed that a total of 49 out of the 170 documents have now been translated. It was therefore agreed to close the action. • PPPAC(20)53 – Psychological Wellbeing Report – To investigate what, if anything, is holding back the “all other ethnic groups” cohort of staff from utilising the Psychological Wellbeing Service – It was noted that this matter would be discussed at the next BAME meeting, with an update provided to PPPAC on 25/02/21. 	LG
PPPAC (20)76	CHAIR’S ACTION MADE OUTSIDE THE MEETING Prof. Gammon informed Members that following discussion at the PPPAC meeting held on 29/10/20, the Information Governance Sub Committee (IGSC) Terms of Reference had been ratified via Chair’s Action, with the minor amendments made concerning the introduction of an In Committee session and a change of lead Director. Members noted the Chair’s Action which had been undertaken.	
PPPAC (20)77	WORKFORCE & ORGANISATIONAL DEVELOPMENT UPDATE The Committee received an update report relating to the Psychological Wellbeing Service, outlining the progress made to date for the provision of the service across HDdUHB and the identification of areas for progression during 2020. Prof. Gammon reminded Members that the function of PPPAC is to ensure that assurance is gained from reports, and that these are scrutinised to ensure that appropriate pace is in place with identified actions. With regard	

to the Psychological Wellbeing Service report, Prof. Gammon was seeking to ensure that robust measures are in place to support staff and to build upon proposals and needs for 2021.

Mrs Gostling emphasised that the report provides an update of actions undertaken to date and identifies how plans have been amended to coincide with COVID-19. Members noted that both a nursing survey and a national staff survey had been undertaken of late.

Prof. Gammon thanked Mrs Gostling for the report and for providing assurance on the robust interventions that are being undertaken with good examples in place to ensure resilience amongst staff. In terms of what HDdUHB is doing to ensure a targeted approach in relation to the contributions individuals will make, Mrs Gostling confirmed that the approach would be linked to the new Relationship Manager roles and would also be discussed with different cohorts, for example, the Black Asian Minority Ethnic (BAME) Group. A targeted approach will also be taken in response to the feedback received from staff surveys, for example, bullying. Themes and staff groups across each county will be explored and plans tailored around each individual area.

In response to Ms Anna Lewis' enquiry in regard to the outcomes that are being put in place, Mrs Gostling confirmed that an evaluation process is undertaken between the Wellbeing Team and individuals entering the system. Positive feedback has been received in terms of the support provided to collective groups of staff and teams in regard to resilience. An evaluation is being undertaken in respect of the 24-hour call line and this is being discussed at the BAME Group and Trade Union (TU) meetings. TU representatives are also undertaking training to become resilience ambassadors and will be provided with a toolkit to support staff.

Cllr. Simon Hancock referred to the staff surveys and intelligence gathering section on page four of the report, and enquired whether there is any informal intelligence on the emerging themes. In response, Mrs Gostling confirmed that bullying appears to be a common theme with 10% of staff who responded feeling bullied by their manager or a colleague. Members noted that a new Respect and Resolution Policy is being implemented which will change the way in which grievances are dealt with.

Referring to the nursing survey undertaken by Swansea University pre-COVID-19, Mrs Gostling stated that systems and processes may need to be assessed on the basis of whether matters raised by staff remain in place or not. Feedback evidenced that senior management were supportive of wellbeing issues, with middle management appearing more of an issue, with further analysis required. Members were pleased to note the very positive outcomes received in relation to whether staff were proud to work for HDdUHB. The recent staff survey results have also now been received and will be analysed and triangulated over the next month.

	<p>Mr Owen Burt enquired whether the ambition of a cycling to work initiative (including electric chargers, storage, etc.) had been raised, and in response Mrs Gostling confirmed this had not featured in any of the surveys. However Ms Suzanne Tarrant, Consultant Clinical Psychologist, is supporting the Green Health agenda and undertaking work relating to supporting healthier lifestyles.</p> <p>The Committee was assured by the robust measures in place and the plans to build upon the existing foundations in 2021. The importance of continuing and building upon the interventions in place and the evaluation element was reiterated.</p>	
	<p>The Committee RECEIVED and NOTED the Psychological Wellbeing Service Update and were ASSURED that:</p> <ul style="list-style-type: none"> • Robust measures and responses are in place to enable the organisation to respond appropriately to support staff psychological wellbeing needs. • Plans are in place to build on these foundations and move proactively forward to meet the continuing needs in 2021. 	

<p>PPPAC (20)78</p>	<p>INTEGRATED PERFORMANCE ASSURANCE REPORT</p> <p>The Committee received the Integrated Performance Assurance Report (IPAR) for Month 8 (2020/21), incorporating COVID-19 elements and focusing primarily on HDdUHB's key deliverable areas. Prof. Gammon reminded Members that the responsibility of PPPAC is to ensure that the report is scrutinised and that there is pace with regard to the achievement of targets.</p> <p>Mr Huw Thomas highlighted the following:</p> <ul style="list-style-type: none"> • An alternative report for the new financial year is being developed. • Welsh Government (WG) is formulating a new matrix from the New Year. • The overall performance of unscheduled care continues to be a challenge and the overall performance trend for the four unscheduled care metrics is declining. • Planned care breaches for referral to treatment time (RTT) within 36 weeks have increased for the eighth consecutive month. • During October 2020, 69% of urgent suspected cancer patients commenced treatment within 62 days which is considerably below the 95% target, although HDdUHB is positioned mid table compared to the rest of Wales. • The 98% target for non-urgent suspected cancer patients was achieved. • Improvements continue to be made to reduce breaches for diagnostic waits, and therapy waits have been consistently reducing each month. • The percentage of patients admitted to a stroke unit within four hours continues to cause concern. • The target for stroke patients to be seen within 24 hours by a stroke consultant has been met. <p>Mr Keith Jones reassured Members that clinical teams are regularly reviewing cancer pathways and waiting lists, and categorising patients on</p>	
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the waiting lists as best they can. HDdUHB is working with WG to develop risk stratification to use intelligence to identify patients and any change to their condition whilst on the waiting list. The exploration of alternative methods of providing clinics, etc., is continuing to be pursued.

Mrs Ros Jervis joined the PPPAC meeting

Prof. Gammon emphasised that it is PPPAC's duty to gain assurance that measures are being put in place and how prioritisation and risk is being managed, both currently and for the future. Mr Jones confirmed that all patients on waiting lists and any new referrals are assessed and categorised in accordance with national guidance, and undertook to ensure that a more detailed explanation is provided at future PPPAC meetings.

KJ

Cllr. Hancock enquired as to the rationale behind the declining figure relating to patients admitted to a stroke unit within four hours in Wthybush General Hospital (WGH). In response, Mr Jones explained that the issue in WGH is similar to other sites; whilst access to a designated bed is being achieved, access to a designated consultant within 24 hours is not always being achieved. This is influenced by the consequences of COVID-19 and the prioritisation of the acute medical team which includes a stroke consultant. Members noted that waiting times for stroke patients to receive speech and language therapy have also declined. Mr Jones undertook to ensure that more detailed information is included within the report provided to the next PPPAC meeting.

KJ

Mrs Gostling informed Members that the challenging workforce position is also impacting upon performance. Sickness rates are at a similar level to the previous year; in addition, 3.8% of staff are self-isolating with a total of 940 staff currently on sick leave or self-isolating. However, recruitment plans are in place for additional staff.

Referring to the rapidly increasing waiting lists, Mr Maynard Davies enquired as to the progress being made with regard to contacting patients with regular updates. Mr Jones confirmed that there is a system in place for all cancer pathway patients and for those on orthopaedic waiting lists. However, it has not been rolled out across HDdUHB for all patients due to the significant challenges associated with resources and the practicality of managing this. Discussions continue at an all Wales level with regard to how this can be extended more broadly. Prof. Gammon suggested this be raised with the Chair of the Quality, Safety & Experience Assurance Committee (QSEAC) to ensure that appropriate procedures are in place to communicate with patients on waiting lists.

AC/KJ

Prof. Gammon recognised that some areas, for example therapies and diagnostics, continue to perform well, however other areas present challenging and difficult data, and on this basis, emphasised that Members are required to understand the performance more broadly and be assured that this is being managed and prioritised.

The Committee **REVIEWED** the Month 8 (2020/21) IPAR report.

**PPPAC
(20)79**

WELSH LANGUAGE STANDARDS UPDATE

Members were presented with the Update on Compliance with the Welsh Language Standards (No. 7) 2018 Regulations report, focusing on how HDdUHB is evolving in terms of embedding the spirit of the standards in our culture and what we do, as well as progress and plans towards achieving compliance with the standards.

Mrs Yvonne Burson explained that the report outlines the legal obligations, values and responsibilities of HDdUHB. Referring to Appendix 3 of the report, Members noted that the Welsh Language Commissioner undertakes a series of surveys and monitoring reports annually to consider compliance of the Welsh language standards. During 2019, HDdUHB formed part of the sample of organisations surveyed with very positive results received. Where the surveys identified a risk of non-compliance, an action plan was developed (Appendix 4) confirming the steps which would be undertaken to ensure compliance. Following implementation of the standards, HDdUHB was subject to the first investigation by the Welsh Language Commissioner as a consequence of a complaint received from a member of the public having received an English only version appointment letter and questionnaire.

Between March and October 2020, all investigations were paused due to the impact of COVID-19 and an extension of six months was granted to HDdUHB to action the enforcements. A thorough review of all letters and forms is currently being undertaken and an update will be provided to the Welsh Language Commissioner imminently. Mrs Burson indicated that assurance is expected to be in place by March 2021, with it suggested that an update be provided to PPPAC on a six monthly basis.

Prof. Gammon thanked Mrs Burson for the report, however recognising that it does not provide details in relation to timelines for actions plans or whether compliance will be reached, requested that for future reporting, additional information is provided highlighting plans, timelines and how challenges will be addressed. For this reason, only limited assurance could be gained. Mrs Burson remained confident that the Welsh Language Team would be in a better position to provide this additional information in the next report. It was agreed for Mrs Joanne Wilson and Mrs Claire Williams to discuss further the frequency of Welsh Language Standards reporting to PPPAC. In the meantime, it was agreed for an update report to be provided at the April 2021 meeting in terms of compliance and to identify any risks.

Prof. Gammon thanked Mrs Burson and the Welsh Language Team for the work undertaken to date and acknowledged the next steps and plan towards achieving compliance with the Welsh Language Standards.

Mrs Yvonne Burson and Mrs Enfys Williams left the PPPAC meeting

**JW/
CW**

JW/YB

The Committee gained limited **ASSURANCE** on the progress being made within HDdUHB towards full compliance of the Welsh Language Standards.

PPPAC
(20)80

BREXIT UPDATE

Members were presented with the European Union (EU) Transition (Brexit) report. Mr Thomas emphasised that PPPAC is required to take assurance from the measures being taken to mitigate the risks identified from the EU transition. It was noted that an update would also be provided at the Board Seminar session scheduled for later in the day (17/12/20). Members further noted that weekly discussions are undertaken across Wales and regular internal meetings held to review the emerging situation and to ensure that mitigations and actions are in place to address issues where possible. Mr Thomas remained reasonably confident that initial stock supply chains would be sufficient.

Ms Jill Paterson joined the PPPAC meeting

Cllr. Hancock enquired about the supply of medicines, in particular the prescribing actions that could be taken should there be changes in prescription habits. In response, Ms Jill Paterson confirmed that close monitoring and joint working with GP Practices is being undertaken and that prescribing behaviour in comparison to indicators across Wales would be reviewed on an individual basis. Certain medication has been challenging to source this year and close monitoring is in place. Mr Thomas added that the key message from WG is not to over-stock, therefore HDdUHB will continue to ensure stock levels remain at the highest possible level without infringing this. Members were pleased to note that the supply chain risk has been reduced from red to amber.

Ms Ann Murphy referred to the utilisation of Newfields Law to engage with EU staff for guidance and support, and queried whether individuals should be aware that the company is a law firm. In response, Mr Thomas confirmed that Newfields Law had been appointed by WG to engage with EU staff for guidance and support in completing settled status applications and is a free of charge service. Mrs Gostling added that regular updates are provided to the cohort of staff affected.

Mr Burt enquired whether in terms of the minimum impact of settled status, had there been any measurable impact upon the care sector. In response, Mr Thomas confirmed that nothing specific has been highlighted with regard to shortages of staff returning after Brexit. Mrs Gostling added that discussions are being undertaken with Local Authority colleagues and that any update would be provided to PPPAC.

Prof. Gammon referred to the red RAG rated Social Care risk “negative impact on social care providers could result in a knock-on impact to the Health Board” highlighted in Appendix 1, which is not reflected within the narrative. Mr Thomas confirmed that this had been RAG rated red due to its possible impact and on reflection, suggested that it be de-risked.

HT

	<p>Members noted the ongoing work that is being undertaken through Pembrokeshire County Council and the Dyfed Powys Local Resilience Forum with regard to the impact on the ports position to ensure appropriate arrangements are in place.</p> <p><i>Mr Paul Williams joined the PPPAC meeting</i></p>	
	<p>The Committee gained ASSURANCE from the measures being taken to mitigate the risks identified from the EU transition.</p>	

<p>PPPAC (20)81</p>	<p>QUARTERS 3 & 4 OPERATING FRAMEWORK UPDATE</p> <p>Ms Paterson provided Members with a verbal update in relation to the Quarters 3 & 4 Operating Framework, emphasising the recent impact upon the plans in place due to both COVID-19 and winter pressures. Ms Paterson highlighted a number of service changes that are required to be enacted from w/c 21/12/20, which have been carefully planned in accordance with WG guidance and agreed via the Tactical Group decision making process. In terms of the increasing rise in infections, Ms Paterson drew Members attention to the recent Public Health Wales statement regarding the significant under-reporting of 11,000 positive COVID-19 cases in Wales as a consequence of planned IT maintenance. These have now been added to the dashboard with the case rate figures amended. Mrs Jervis indicated that the amended figures are Carmarthenshire - 602.8 per 100,000, Pembrokeshire – 213 per 100,000 and Ceredigion – 203.6 per 100,000. Concern was expressed regarding the impact upon community services, the significant number of staff self-isolating and the increased levels of infection, all of which are having an impact on the ability to deliver services. Members noted there are between 20% -27% of community staff absent from work either through having contracted COVID-19 or through self-isolation. In addition, a number of care homes have closed to new residents.</p> <p>Members further noted that NHS Chief Executives, Chairs and Critical Care leaders had met with the Minister earlier in the week, to discuss the ongoing delivery of services. A planned change had been agreed to release staff, where additional harm would not be involved, to provide cover in the most effective way within critical care areas. A media statement would be issued to the public to explain the proposed changes.</p> <p>Mr Jones emphasised the requirement to be able to safely staff critical care areas and brought Members attention to the recent WG announcement regarding options for health boards to consider the prioritisation of essential services as a critical period is entered. It was noted that within the acute work stream, discussions have been held with each hospital team, Directorates of Planned Care, the Women and Children’s service, and Heads of Nursing to consider the most effective way to prioritise staff resources for the forthcoming period. These service changes will be in place initially for a four week period from 21/12/20 with a review to be</p>	
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undertaken during the second week of January 2021 to determine whether the timescale would need to be extended.

Mrs Libby Ryan-Davies joined the PPPAC meeting

Whilst the plan is to reduce outpatient service delivery, urgent pathways such as post cancer checks, and patients urgently referred where a judgement on assessment is required within 28 days of referral, will continue. The option of continuing acute and urgent pathways of patient assessment where these can be undertaken through a virtual route is being pursued. If these virtual clinics are not dependent upon nursing resources, they may be able to continue given that the major requirement at the current time is to release nursing resource. A similar theme will be in place for endoscopy procedures, with prioritisation for the most urgent patients (P1 category), with treatment for those patients in the P2 category to be postponed. Certain screening programmes and therapy pathways may also be paused post-Christmas to deploy physiotherapy staff into the ward environment to supplement nursing teams.

Miss Battle left the PPPAC meeting

Prof. Gammon reiterated that the role of PPPAC is not to approve the changes, but to understand the impact this is having upon the Quarters 3 & 4 Operational Plan, and to gain assurance that measures are in place to manage performance, and that the redeployment of staff is being undertaken in order to minimise risk. Ms Paterson confirmed that the matter had been discussed at both Tactical and Bronze Groups and Mrs Jo Wilson confirmed that appropriate governance is in place to allow decisions such as these to be undertaken. Mrs Wilson emphasised the need to be open and transparent with Community Health Council colleagues and confirmed that a briefing would be provided at the Board Seminar session scheduled later in the day with a further briefing provided to Independent Members w/c 21/12/20. Mr Sam Denten acknowledged the evolving issues and welcomed the anticipated communications in order for the population to understand the impact placed upon their care. Prof. Gammon undertook to ensure that Ms Paterson and Mr Jones provide regular updates to the CHC.

JP/KJ

Ms Paterson informed Members that two of the field hospitals (FH) have opened and are being utilised as a step-down facility from acute services; the Selwyn Samuel FH in Llanelli, which currently has 28 patients and the Bluestone FH in Pembrokeshire, which currently has two patients, shortly to be extended to eight patients.

Prof. Gammon expressed gratitude to Ms Paterson and Mr Jones for the update on the current position with regard to the Quarters 3 & 4 Operating Framework, acknowledging the ever changing and challenging position and welcoming confirmation that proposed communications would be distributed to partners, staff and the population of HDdUHB.

Ms Paterson left the PPPAC meeting

The Committee **NOTED** the verbal update relating to the Quarters 3 & 4 Operating Framework.

PPPAC
(20)82

REPORT ON THE DISCRETIONARY CAPITAL PROGRAMME 2020/21 & CAPITAL GOVERNANCE UPDATE

Members were presented with the Report on the Discretionary Capital Programme (DCP) 2020/2021 & Capital Governance Update, setting out the position with regard to the approved split of the available discretionary capital funding for the financial year 2020/21, and the risks emerging in relation to capital pressures.

Mr Williams highlighted the following:

- WG have confirmed permission for HDdUHB to retain the sale proceeds from Cardigan Hospital and Cardigan Health Centre when it occurs, which is estimated to be approximately £300k.
- Referring to the expenditure table on page 3 of the report, Mr Williams indicated that HDdUHB has committed £11.295m of COVID-19 funding and WG is currently releasing the funding for these items as the expenditure is being incurred.
- Approval for the progression of the AGS Dental solution has been received from Executive Team, however this will create a risk of £0.130m against the capital resource limit. It was noted that there is slippage available to manage this if required.
- There is also slippage and an unexpected allocation with regard to the WGH fire compliance business case, and some expenditure related to this may be pushed back into the 2021/22 financial year.
- It is anticipated that additional sources of year-end capital, although relatively small, may be received from WG between now and the end of the financial year.
- The Regional Cellular Pathology Strategic Outline Business Case (OBC) has been approved by WG and work is underway to commence work on this.
- The Minaeron Integrated Care Centre scheme recently won the Ystadau Cymru award in the Integrated Services category.
- The Cylch Caron scheme has been suspended due to the Barcud Housing Group withdrawing from the scheme.
- The Women & Children's Phase 2 scheme remains at RAG status red due to the significant delay in the scheme's completion, which is currently reported as February 2022. Resolution has been achieved on the time delay at the end of Phase 1 of the project, providing assurance on the extent of HDdUHB's financial liability.

With regard to year-end capital slippage, Mr Thomas anticipated that there may be additional sums to the £5million currently available and that any decisions made would be reported outside of PPPAC due to the timescales involved.

In response to Cllr. Hancock's enquiry regarding how end of year slippage is routinely proportioned, Mr Williams confirmed that all health boards receive

	<p>a share with a bid submitted to WG for more than anticipated. Members noted that a substantial bid would be submitted by HDdUHB.</p> <p>Mr Burt enquired whether the Cylch Caron scheme would now need to revert “back to the drawing board”, and whilst this was acknowledged, Mr Williams confirmed that there remains a starting point in place with land available and that Ceredigion County Council is aware of the model of community care required.</p> <p>Prof. Gammon thanked Mr Williams for the informative report and expressed disappointment with regard to the Cylch Caron scheme. Clarification was sought in relation to the decision to only commit 90% of allocated funds to provide a level of contingency should additional risks emerge, and in response, Mr Williams confirmed that this is to provide flexibility to respond to COVID-19 pressures. Prof. Gammon was pleased to note the positive news with regard to the Minaeron Integrated Care Centre award and the approval of the Regional Cellular Pathology OBC. In response to clarification regarding the fire compliance works required in Glangwili General Hospital and whether funding is allocated by WG or via the DCP, Mr Williams confirmed that it is normal practice for it to be funded from the DCP, followed by a claim submitted to WG following approval of the works, however funding has been received in advance this year for the work involved.</p>	
	<p>Members:</p> <ul style="list-style-type: none"> • NOTED the funding approval from WG for the ED Streaming Units. • NOTED the approval from WG to retain the sale proceeds for Cardigan Hospital and Cardigan Health Centre. • NOTED the approval from Gold Command Group to distribute the additional funding available on COVID-19 and non-COVID-19 priorities. • NOTED that going forward all COVID-19 and non-COVID-19 capital priorities will be considered through the HDdUHB’s established capital planning processes. • NOTED that very significant backlog pressures remain which will need to be prioritised for any balance of funding received from WG. • NOTED WG approval for the Regional Cellular Pathology Programme Business Case and the WG award received in relation to the Minaeron ICC scheme, Aberaeron. • NOTED the continued red RAG rated schemes and the underlying reasons for their status which will be the subject of further reporting to PPPAC. 	
<p>PPPAC (20)83</p>	<p>DEVELOPING THE 3 YEAR PLAN FOR THE PERIOD 2021/22-2023/24 UPDATE</p> <p>Members were presented with and noted the Developing the 3 Year Plan for the Period 2021/22-2023/24 Update report, providing an update on the development of the plan and the further detail received from WG in respect of their expectations. Mrs Libby Ryan-Davies informed Members that the NHS Planning Framework had only very recently been received and that an update would be provided at the Board Seminar session scheduled for later in the day (17/12/20).</p>	

	<i>Mrs Ryan-Davies left the PPPAC meeting</i>	
	Members NOTED the update with regard to developing the 3 year plan for the period 2021/22-2023/24.	

PPPAC (20)84	<p>CORPORATE RISKS ALLOCATED TO PPPAC</p> <p>Members were presented with the Corporate Risk Report, identifying a total of nine corporate risks allocated to PPPAC, four of which are new risks, one with a reduction in risk score and four with no change in risk score. Concern was expressed to officer members regarding the circulation of an amended version of the report the day prior to the meeting, leading to frustrations amongst Members who had read, scrutinised and made annotations on the original version. Mrs Wilson confirmed that risks had been updated, suggesting that the revised report could have been sent as an e-mail attachment as opposed to uploading to Admincontrol. It was agreed that going forward, both the original and any revised versions of Committee reports would be made accessible to Members to ensure all previous annotations are preserved.</p> <p>Mrs Wilson explained that the additional four risks had been previously discussed at Public Board, and are all reviewed in a dynamic way by the Executive Team before being placed on the Corporate Risk Register and approved by the Chief Executive. Members noted that these new risks threaten the delivery of the Quarter 3/4 (Q3/4) Operating Plan and that there will also be an additional risk concerning planned care.</p> <p>Prof. Gammon recognised the progress made to date, in particular the de-escalation of Risk 371 – <i>Inability to meet WG target for clinical coding and decision-making will be based on inaccurate/incomplete information</i>, which had been a challenge for some time.</p> <p>Mrs Gostling referred to Risk 1018 - <i>Delivery of Q3/4 Operating Plan – Insufficient workforce to support delivery of essential services</i>, and provided assurance that the senior Workforce Team is reviewing the risk on a weekly basis, and whilst this is progressing, remains a significant risk. It was noted that all risks assigned to the Workforce & OD Team are monitored twice weekly during senior team meetings and a number of processes are being identified, e.g. partnership agreements with other organisations and on-going discussions regarding Corporate Team deployment.</p> <p>Prof. Gammon referred to Risk 1028 <i>Delivery of Q3/4 Operating Plan – Risk that Primary Care contractors may not be able to operate</i>, and queried whether this will be updated in light of the earlier update provided by Mr Jones with regard to the impact of COVID-19, and whether there is a contingency plan due to the vulnerability of the current environment. Mrs Wilson emphasised that this remains a high risk with a risk score of twelve and undertook to discuss further with Ms Paterson and obtain an update for Members.</p>	<p style="text-align: right;">JW</p>
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	<p>Members noted the mitigations in place and accepted these are appropriate, with the exception of Risk 1028 which awaits a further update and Risk 1018 which is reliant upon other agencies. Both risks will continue to be monitored by PPPAC.</p>	
	<p>The Committee was ASSURED that:</p> <ul style="list-style-type: none"> • Identified controls are in place and working effectively. • Planned actions will be implemented within stated timescales and will reduce the risk further and/or mitigate the impact, if the risk materialises. and challenged where assurances are inadequate. 	
<p>PPPAC (20)85</p>	<p>OPERATIONAL RISKS ALLOCATED TO PPPAC</p> <p>Members were presented with the Operational Risk Report containing the five risks contained within the risk register as at 30 November 2020.</p> <p>Referring to the unchanged risk score of Risk 54, <i>Non achievement of agreed performance for urgent & non-urgent suspected cancers affects the whole Health Board</i>, Ms Lewis enquired whether this should remain a risk and if so, whether the likelihood should be increased given the current performance. In response, Mr Jones confirmed that from an operational perspective, it should remain on the register, and that in terms of risk radar, it continues to be a focus. The judgement that the risk score remains unchanged is underpinned by influential factors outside of HDdUHB's control, e.g. availability of patients as a consequence of COVID-19. Ms Lewis thanked Mr Jones for the explanation and emphasised that if the current situation continues to deteriorate, the matter may be required to be assessed as to whether it is a risk (i.e., something which happens in the future) or an event (i.e. an actuality). Mrs Wilson suggested that the risk be re-assessed, to establish the consequences for patients, and offered support from the Head of Assurance and Risk, if required.</p> <p>Prof. Gammon referred to Risk 245, <i>Inadequate facilities to store patient records and investment in electronic solution for sustainable solution, and emphasising that the risk commenced in 2016</i>, and enquired whether the extended timescale is due to the controls in place not being sufficient or whether there is insufficient pace. Mr Thomas indicated that whilst the risk was initially documented in 2016, it had actually been in place for a longer period of time. The challenge is that of a financial nature and would require significant investment to digitalise the records involved, both medical and corporate, and that a strategy for the Digital Team to manage records would be pursued in the future.</p>	<p>AC/KJ</p>
	<p>The Committee:</p> <ul style="list-style-type: none"> • REVIEWED and SCRUTINISED the risks to seek assurance that all relevant controls and mitigating actions are in place. • DISCUSSED whether the planned actions would be implemented within stated timescales and would reduce the risk further and/or mitigate the impact if the risk materialises. • Was able to provide the necessary assurance to the Board that HDdUHB is managing these risks effectively. 	

PPPAC (20)86	CAPITAL ESTATES & IM&T SUB-COMMITTEE UPDATE REPORT & RATIFICATION OF TERMS OF REFERENCE	
	<p>Members were presented with the Capital, Estates and IM&T Sub-Committee (CEIM&TSC) Update Report and Terms of Reference for the Sub-Committee following the meeting held on 19th November 2020. Mr Williams emphasised that the scope of the meeting had been narrowed due to dealing with the fluid position relating to capital pressures. Mr Davies confirmed that he had attended the meeting and was assured in relation to the matters discussed and in particular the management of the Discretionary Capital Programme (DCP), given the substantial fluidity of the situation.</p> <p>Members approved the CEIM&TSC Terms of Reference, noting that the changes reflect an interim position, which will be subject to review following the appointment of the Director for the Executive portfolio which will be reflected in the membership. Paragraph 5.2 within the Terms of Reference had also been amended to reflect the fact that the CEIM&TSC now receives proposals for prioritisation in the management of capital related risks.</p> <p>Prof. Gammon referred to the IM&T Programme Business Case (PBC) currently on hold and enquired whether this is due to digitalisation. Mr Williams confirmed that the PBC submitted from all health boards including HDdUHB had not been pursued as funding had been utilised elsewhere. Although it remains extant, it is not being pursued as originally anticipated. Mr Anthony Tracey confirmed that a digital fund of £25 million has been created from which key programmes would be funded from, however this has been delayed due to COVID-19. It was agreed that this would remain on the governance tracker. Referring to the criticality of digitalisation, Mr Thomas enquired whether it be more appropriate for digital response documents to be presented to PPPAC or Board Seminar and undertook to discuss the matter further with Prof. Gammon and Mrs Wilson.</p>	HT
	The Committee RECEIVED and NOTED the Capital, Estates and IM&T Sub Committee update report.	

PPPAC (20)87	INFORMATION GOVERNANCE SUB-COMMITTEE UPDATE REPORT	
	<p>Members were presented with the Information Governance Sub-Committee (IGSC) Update Report following the meeting held on 2nd October 2020. Mr Tracey informed Members that an Information Governance consultant had been appointed to support the work to complete the Information Asset Registers, with it anticipated that all registers will be completed by the end of January 2021, followed by ratification by the IGSC. The General Data Protection Regulation (GDPR) compliance risk 343 is in progress, with it anticipated that the risk will be mitigated to RAG rating amber or green by the next PPPAC meeting.</p> <p>In relation to cyber security, the Information & Communication Technology (ICT)/Information Governance (IG) Teams have completed the self-assessment involving approximately 300 questions, to establish HDdUHB's position against achieving Cyber Essential Plus certification. Members noted that HDdUHB did not achieve full compliance in two areas associated with legacy systems due to the use of old operating systems which are unable to</p>	

	<p>be upgraded. This matter is being taken forward with information asset owners.</p> <p>Cllr. Hancock confirmed that he had attended the IGSC meeting on 2nd October 2020 and had gained assurance that work is being developed at considerable pace.</p> <p>Mr Burt referred to the clinical coding performance and queried the contribution the four recently appointed trainee staff are making to the backlog. Mr Tracey confirmed that it routinely takes 18 months to fully train a clinical coder, however the training for the four individuals has been fast tracked to be completed over a period of 12-15 months. It is anticipated that a 1% impact will be made within the first year, providing at least a 4-5% impact on HDdUHB figures.</p> <p>Mr Davies referred to an IG audit report undertaken during COVID-19 which had been presented at the Audit and Risk Assurance Committee (ARAC) on 15th December 2021, whereby substantial assurance had been received and Mr Davies extended gratitude to Mr Tracey and his colleagues.</p> <p>Members noted the IGSC Update Report and gained assurance from the activities being undertaken.</p> <p>The Committee RECEIVED and NOTED the Information Governance Sub-Committee (IGSC) update report.</p>	
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<p>PPPAC (20)88</p>	<p>CORPORATE & EMPLOYMENT POLICIES</p> <p>Members were presented with two policies requiring ratification:</p> <p>Ethical Employment Policy (935) – Mr Thomas confirmed that this represents a new policy and HDdUHB, as a major public sector employer and commissioner of services, is committed to eradicating unlawful and unethical employment practices and to ensure all workers at every stage of the supply chain are treated fairly. The policy aims to achieve this by ensuring organisational compliance with the Welsh Government Code of Practice on Ethical Employment in Supply Chains designed to eliminate modern slavery and support ethical employment practices. Members approved the Ethical Employment Policy.</p> <p>Carers Policy (511) – Mrs Gostling confirmed that this represents a new policy and is for all employees under a contract of employment within HDdUHB, and provides advice for managers and staff with caring responsibilities. Members approved the Carers Policy.</p> <p>In response to Mr Davies' query whether there is a related all-Wales Carers Policy or whether this has been instigated by HDdUHB, Mrs Gostling confirmed that it has been developed locally. The forward thinking of the teams involved was recognised and commended.</p> <p>The Committee APPROVED the:</p> <ul style="list-style-type: none"> • Ethical Employment Policy (935). • Carers Policy (511). 	
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PPPAC (20)89	BILINGUAL SKILLS POLICY	
	Members were presented with the Bilingual Skills Policy which aims to: <ul style="list-style-type: none"> • Increase the use of Welsh within the workplace. • Enable everyone who receives or uses our services to do so through the medium of Welsh or English, according to personal choice, and to encourage other users and providers to use and promote the Welsh Language within the health sector. • Ensure staff are able to enact their right to receive services through the medium of Welsh within our internal administrative systems. 	
	Members approved the Bilingual Skills Policy. The Committee APPROVED the Bilingual Skills Policy.	
PPPAC (20)90	OUTCOME OF ADVISORY APPOINTMENTS COMMITTEE	
	The Committee received the Advisory Appointments Committee report, providing an update on the outcome of the Advisory Appointments Committees (AACs) held between 12 th October 2020 and 30 th November 2020 and approved the appointments on behalf of the Board. The Committee APPROVED the outcome of the AAC appointments held between 12 th October 2020 and 30 th November 2020 on behalf of the Board.	
PPPAC (20)91	ARCH	
	Members were presented with the A Regional Collaboration for Health (ARCH) Portfolio Update Report, providing an update on the activities of the ARCH Portfolio for the period October/November 2020 together with an update on the regional discussions that have taken place between HDdUHB and Swansea Bay University Health Board (SBUHB). Prof. Gammon expressed concern regarding the limited representation from HDdUHB with generally only one representative involved in the meetings, suggesting HDdUHB is therefore not influencing the agenda. This is particularly important in regard to eye care, Pentre Awel and dermatology, and Prof. Gammon would not want HDdUHB to be compromised in relation to the potential regional planning of services. Mr Thomas confirmed that this would fall under the portfolio of the new Executive Director of Strategic Development and Operational Planning and that an advert had recently been placed. Mrs Gostling and Mr Thomas undertook to discuss ARCH representation at the Executive Team meeting to ensure HDdUHB is appropriately represented in the future.	LG/HT
	The Committee NOTED the HDdUHB and SBUHB regional discussions and the ARCH Portfolio Summary Update.	
PPPAC (20)92	A HEALTHIER MID & WEST WALES PROGRAMME BUSINESS CASE UPDATE	
	Members were presented with A Healthier Mid and West Wales Programme Business Case PowerPoint presentation. Mr Williams emphasised that stakeholder engagement had been undertaken, with the	

	exception of Scheduled Care and Medicine due to clinical pressures, and extended gratitude to all those involved.	
	Prof. Gammon thanked Mr Williams for the informative presentation, which provided clear aspirations and timelines, and looked forward to receiving updates as the project progresses.	
	The Committee NOTED the A Healthier Mid and West Wales Programme Business Case presentation.	

PPPAC (20)93	PPPAC WORKPLAN 2020/21	
	The PPPAC work plan for 2020/21 was received for information which will be amended in accordance with discussions and recommendations discussed during the meeting.	
	The Committee NOTED the PPPAC work plan for 2020/21.	

PPPAC (20)94	REFLECTIVE SUMMARY OF THE MEETING	
	<p>Mr Thomas outlined the key topics discussed during the meeting for inclusion in the PPPAC update report to Board:</p> <ul style="list-style-type: none"> • Reflection of the Chair's opening statement recognising the hard work of staff in the current challenging environment as well as recognition of those staff members who are unwell or self-isolating, and the tribute paid to Mrs Carol Cotterell. • Members were assured by the measures and interventions in place with regard to the Psychological Wellbeing report. • The IPAR was scrutinised by Members with areas performing well being recognised together with challenging areas. Greater reassurance regarding the management of risk will be provided in future. • Limited assurance was received in relation to the Welsh Language Standards. • Assurance was provided regarding the supply chain and workforce in relation to Brexit. • The changes in line with Quarter 3 & 4 planning represent an ever-changing prioritisation and communications will continue to be provided to stakeholders. • The positive news regarding the Minaeron Integrated Care Centre award and approval of the Regional Cellular Pathology OBC was noted. • Disappointment was expressed regarding the suspension of the Cylch Caron scheme. • Sub-Committee updates were noted and it was recognised that the digital strategy will be presented to Board Seminar as it affects all Committees. <p>Prof. Gammon warmly thanked colleagues for their diligent scrutiny of Committee papers, and extended gratitude to Mrs Williams for providing support to both the Committee and himself as Chair during the year. Members were wished a happy and safe Christmas.</p>	

PPPAC (20)95	DATE AND TIME OF NEXT MEETING	
	25 th February 2021 at 1.00 p.m. - Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen	

COFNODION Y CYFARFOD PWYLLGOR CYNLLUNIO POBL A SICRWYDD PERFFORMIAD CYMERADWYO / UNAPPROVED MINUTES OF THE EXTRA-ORDINARY PEOPLE PLANNING & PERFORMANCE ASSURANCE COMMITTEE MEETING

Date and Time of Meeting:	10 th February 2021 at 1.30 p.m.
Venue:	Board Room, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen, SA31 3BB

Present:	Professor John Gammon, Independent Member (PPPAC Chair) (VC) Mr Owen Burt, Independent Member (VC) Ms Ann Murphy, Independent Member (VC) Ms Anna Lewis, Independent Member (VC) Mr Maynard Davies, Independent Member (VC)
In Attendance	Mrs Lisa Gostling, Executive Director of Workforce & OD (Joint PPPAC Lead) (VC) Mr Huw Thomas, Director of Finance (Joint PPPAC Lead) (VC) Mr Steve Moore, Chief Executive (VC) Mrs Ros Jervis, Director of Public Health (VC) Ms Alison Shakeshaft, Director of Therapies and Health Science (VC) Mrs Joanne Wilson, Board Secretary (VC) Mr James Johns, Internal Audit (VC) Mr Sam Dentten, HDdUHB Community Health Council (VC) Mrs Claire Williams, Committee Services Officer (Secretariat)

Agenda Item		Action
PPPAC (21)01	INTRODUCTIONS AND APOLOGIES FOR ABSENCE Apologies for absence were received from Cllr. Simon Hancock, Independent Member. Prof. John Gammon referred to the Radio 5 interviews, involving Hywel Dda University Health Board (HDdUHB) colleagues held earlier in the day, and on behalf of PPPAC acknowledged the work undertaken and the way in which colleagues conduct themselves which is a credit to HDdUHB. The resilience and professionalism which colleagues have displayed were also acknowledged.	

PPPAC (21)02	DECLARATIONS OF INTEREST No declarations of interest were made.	
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PPPAC (21)03	MASS VACCINATION PROGRAMME DELIVERY PLAN Members were presented with the COVID-19 Mass Vaccination Programme Delivery Plan. Mr Steve Moore explained that the vaccination programme is a fast moving fluid position. Currently, 21% of the HDdUHB population have received their first dose of either the Pfizer or AstraZeneca vaccination, with the Health Board on target to complete	
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the rollout to those within priority groups 1 – 4 of the Joint Committee on Vaccination and Immunisation (JCVI) vaccine priority groups by 14th February 2021. Referring to the mass vaccination centres (MVC) within the HDdUHB area, Members were informed that the plan had been to focus upon vaccinating the population aged between 75 and 79 years at MVCs utilising the Pfizer vaccine, with those aged between 70 and 74 years and clinically extremely vulnerable receiving the AstraZeneca vaccine at GP practices. However, due to capacity issues within GP practices, a number of the clinically extremely vulnerable cohort will receive the vaccine at an MVC instead. With effect from 15th February 2021, commencement of the rollout of the second dose of the Pfizer vaccine will be undertaken given that supplies of the AstraZeneca are substantially less than anticipated.

The forthcoming two weeks will be used as an opportunity to train new staff, with the commencement of vaccinating those within priority groups 5 – 9 to take place from 1st March 2021 with the anticipation that this group will have received their first vaccination by early April 2021. Mr Moore emphasised that the Plan in place should allow these targets to be reached, based on sufficient supplies being available. In terms of assurance, Members noted that the Plan is a live and fluid position and any changes would be ratified by Tactical Group and enacted by the Bronze Vaccine Delivery Group.

Prof. Gammon expressed gratitude to Mr Moore for the presentation and the outstanding work undertaken and questions were invited.

Mr Maynard Davies reiterated Prof. Gammon's gratitude to the Executive Team for the work undertaken. Referring to the ambition for the weeks ahead, Mr Davies enquired whether the functionality of the Welsh Immunisation System (WIS) to enable call and recall services for the general population, as well as the workforce, is in place. In response, Mrs Jervis confirmed that this is the case, however advised that there have been a number of challenges requiring a deviation from original plans, including the change of specific cohort groups attending MVCs and GP practices. Referring to the 75 – 79 year old cohort, Mrs Jervis informed Members that while this cohort had been invited to attend an MVC, there had been some logistical issues with regard to the WIS call and recall system. However, matters have now improved, with a system in place to recall staff for the second dose of the vaccine from 15th February 2021. Mr Huw Thomas reiterated the issues raised in relation to WIS and whilst acknowledging that the system had been developed at pace, it has now been improved, and gratitude was reflected to the team at NHS Wales Informatics Service (NWIS) for the efforts undertaken.

In response to whether supplies of the vaccine are a concern, Mr Moore confirmed that 14,000 doses of the AstraZeneca vaccine are expected over the forthcoming two weeks which is approximately half that anticipated. Referring to the Plan being based on administering 24,000 vaccines per week from 1st March 2021, Mr Moore emphasised that

supply issues continue to be part of the planning challenge with insufficiencies in supply outside of the Health Board's control. Mrs Jervis referred to correspondence received from the Chief Pharmaceutical Officer with regard to the Pfizer vaccine throughput at the current time, indicating that no more first doses of the Pfizer vaccine should be given from 15th February 2021 to ensure there are sufficient supplies in place for second doses to be administered. Referring to AstraZeneca stock levels, Members noted an insufficiency of supply within GP practices during w/c 31st January 2021, requiring some patients to attend MVCs instead.

Mr Sam Dentten emphasised the increased positive feedback received from members of the public with regard to the Health Board's vaccination programme, commending the information being shared, including on social media, with the public, and applauding the achievements to date. Although some concerns had been raised relating to congested MVCs, these have now been resolved, and the Community Health Council will continue to work alongside HDdUHB and Primary Care colleagues to resolve any further issues raised.

Referring to individual members of the HDdUHB population who may be 'isolated', Mr Owen Burt enquired how these individuals are being reached. In response, Mrs Jervis confirmed that as far as possible, all members of the HDdUHB population have been contacted and referring to those who are not digitally competent, arrangements have been put in place to enhance call handling via the Command Centre and ensuring that the COVID-19 contact telephone number is available to this cohort. Members were pleased to note that the demand to receive the vaccine has been substantial, whilst recognising there will always be a number who are vaccine resistant; the use of mobile clinics is being pursued to target specific groups. Referring to the utmost rural areas within the HDdUHB area, the challenge has been the rollout of the Pfizer vaccine and these concerns have been raised at a national level. However, the support received from members of the community and the third sector has been extraordinary, with it pleasing to note that the Mid & West Wales Fire & Rescue Service have operationalised 6 cars to transport members of the public to an MVC. Mr Burt confirmed that he was reassured by the response received.

Referring to the statement on page 22 of the Plan "*In the second phase, further recommendations are awaited from JCVI and we hope the rest of the population in Wales will be vaccinated. The advice from the JCVI is that the focus for this first phase should be on preventing further hospital admissions and vaccinating those people who are at increased risk first*", Ms Anna Lewis enquired when we could envisage we would be clear about the expectations. In response, Mrs Jervis emphasised that the recommendations made by the JCVI are outside of HDdUHB's control. Regular meetings, and lobbying (including on behalf of first responders, i.e. police, fire service and education) is being undertaken. It was noted

	<p>that priority groups 1 – 9 had been devised following learning taken from the first COVID-19 pandemic wave, with the JCVI clear that the groups would be linked to age and not to general occupation. Occupational risks are being considered as part of the second wave and it is anticipated that there may be a further update at the National Board meeting scheduled for 11th February 2021 with regard to Phase 2. Mrs Jervis undertook to provide an update to Independent Members should further clarification be received at the National Board meeting.</p> <p>Prof. Gammon sought assurance that the Plan is not over ambitious and in response, Mrs Jervis emphasised that although the Plan is ambitious, concerns remain regarding the sufficiency of supply of the vaccine and the workforce required to operate all MVCs to enable the targets to be achieved. However, recruitment and training processes have been exceptional, and Mrs Jervis reassured Members that HDdUHB has been tested to the absolute maximum during the previous fortnight.</p> <p>In response to whether there is confidence in the underpinning governance structure, Mrs Joanne Wilson confirmed that the governance structure had been approved by the Board, and the Bronze level Vaccine Delivery Group which has been established reports into Tactical Group, with weekly updates provided to Formal Executive Team (COVID-19).</p> <p>Referring to the five delivery arms contained within the Plan, Prof. Gammon queried the absence of a sixth arm relating to HDdUHB outreaching to the housebound cohort of the population. In response, Mrs Jervis confirmed that the fifth arm “in-reach/out-reach services” covers those who are housebound. Prof. Gammon questioned whether there needs to be clear reference made regarding visiting patients homes and Mrs Jervis confirmed that vaccinating in patients homes is already being undertaken by district nurses, utilising the AstraZeneca vaccine.</p> <p>Prof. Gammon summarised that Members had considered the Vaccination Programme Delivery Plan and gained assurance that it is appropriate to the requirements of HDdUHB; the responses to individual Members questions have also provided confidence. Prof. Gammon expressed gratitude to Mrs Jervis and those colleagues involved for the substantial work undertaken.</p> <p><i>Mr Steve Moore left the PPPAC meeting</i></p>	RJ
	The Committee gained ASSURANCE from the COVID-19 Mass Vaccination Programme Delivery Plan.	
PPPAC (21)04	<p>HYWEL DDA UHB RISK ASSESSMENT FORM – DELAYED IMPLEMENTATION OF ROUTINE ASYMPTOMATIC TESTING OF HEALTH BOARD PATIENT-FACING STAFF WITH LATERAL FLOW DEVICES (LFD)</p> <p>Members were presented with the Delayed Implementation of Routine Asymptomatic Testing of Health Board Patient-Facing Staff with Lateral</p>	

Flow Devices (LFD) and risk assessment. Ms Alison Shakeshaft referred to the changing nature of the matter and provided a verbal update.

In December 2020, Welsh Government (WG) requested that health and social care commenced routine, twice-weekly testing of asymptomatic staff using LFDs in order to seek out COVID-19 infection amongst patient-facing staff. Prior to Christmas 2020, a decision had been made to delay implementation until 2021 based on an assessment of the risks associated with implementation versus the risks of delaying implementation, including serious concerns that this could destabilise the already pressured workforce. As a result, HDdUHB was the only Health Board in Wales not to implement routine asymptomatic testing at that time, with evidence since highlighting that the test and find approach is producing very few positive COVID-19 cases.

A review of the risk assessment was undertaken in January 2021, and learning from the pathfinder programmes across NHS Wales, significantly reduced the risk associated with implementation, resulting in a decision to implement a more cautious and phased approach to the routine asymptomatic testing of HDdUHB patient-facing staff with LFDs as follows:

- To implement the offer of testing to the chemotherapy teams (80 staff) from 01/02/21, followed by a rollout plan to offer to all patient-facing staff and primary care staff by 31/07/21.

There were also concerns regarding the lack of a digital reporting solution, however this has now been put in place which transfers positive results into the Tracing Team CRM system to enable immediate tracing, and the roll out of the system has been commenced. Further concerns have been expressed to WG as the system was established for use by staff in England and not intended for use in Wales; work is being undertaken to amend it for more appropriate use in Wales.

It is now anticipated that the testing of all HDdUHB patient-facing staff will be rolled out by the end of May 2021 as opposed to the end of July 2021.

Struggling to comprehend the benefits of undertaking the testing, Ms Lewis enquired why HDdUHB is required to undertake this task considering the efforts required versus the little benefit. Whilst agreeing, Ms Shakeshaft emphasised that the testing should not be a priority and that focus should be upon other matters including vaccinating the population. These concerns have been discussed with WG, however the direction to rollout testing remains. Ms Shakeshaft further emphasised that staff have a personal choice of whether or not to undertake the test.

Mr Davies enquired whether the final national Standard Operating Procedure (SOP) and Frequently Asked Questions (FAQs) are now available and in response, Ms Shakeshaft confirmed that both documents

have now been received, in the meantime a version had been produced by Ms Shakeshaft.

Prof. Gammon recognised that this is a WG requirement and the Committee gained assurance from the report provided and understood the requirement to offer the testing to staff managing vulnerable, immune compromised patients.

Ms Shakeshaft presented a “Programme for Asymptomatic Staff testing for COVID-19 utilising Lateral Flow Devices (LFD)” presentation to Members. Members noted that a meeting had taken place on 9th February 2021 with operational lead colleagues to discuss those staff groups that should be prioritised which was presented at Tactical Group on 10th February 2021, requesting comments to be submitted by 11th February 2021. Referring to slide 2, Ms Shakeshaft reiterated that the rollout plan for the first cohort of Group 1 (Chemotherapy staff) had already been implemented and is also being rolled out across COVID-19 outbreak wards; the final cohort within Group 1 is “visiting professionals to care homes”. Members noted that direct communication has been distributed to care homes, advising them not to allow visiting professionals to enter until the individual concerned has received a negative LFD result. The initial plan had been that visiting professionals would be tested when attending at care homes, however as the result takes 30 minutes, it has been agreed that this cohort of staff will undertake twice weekly testing at home, followed by the digital solution conveying a text message containing their result which can be presented to the care home, provided it is within the previous 4 days. Clarification is being sought from WG with regard to whether this requirement is mandatory.

Members considered there to be a very clear opportunity cost by deploying scarce capacity in this way.

Prof. Gammon queried how proactive HDdUHB would be in terms of offering the rollout of testing and expressed concern about the implications for the workforce, depending on the positivity rates, in terms of sending staff home to self-isolate. In response, Ms Shakeshaft advised that due to the sensitivity of the test, the risk of false negatives is a concern, however staff are still required to use Personal Protective Equipment (PPE) and follow Infection Prevention and Control (IP&C) regulations. It is anticipated that there would be less than 1% positive results received. In response to how pro-active the offer of testing for staff would be, Members noted that Command Centre staff are liaising with team managers on a priority basis to ensure this is rolled out effectively, with the challenge being the logistics of ordering and distributing kits to staff which is currently being undertaken.

In summary, Members gained assurance from the report provided and approved the implementation arrangements in place, appreciating that in terms of resources, this will provide an additional means of managing

	<p>COVID-19 within HDdUHB. However, the concerns of Members were noted in terms of the amount of effort required, based on a test where validity is questionable.</p> <p>Prof. Gammon expressed gratitude to Ms Shakeshaft and those colleagues involved with the work undertaken.</p>	
	<p>The Committee gained ASSURANCE from the Delayed Implementation of Routine Asymptomatic Testing of Health Board Patient-Facing Staff with Lateral Flow Devices (LFD) and risk assessment and supported the Executive Team decision to implement a phased approach to the routine asymptomatic testing of these patient-facing staff with LFDs as follows:</p> <ul style="list-style-type: none"> • To implement the offer of testing to the chemotherapy teams (80 staff) from 1st February 2021 (already implemented); follow by a • Rollout plan to offer testing to all patient-facing staff (circa 7,900 Health Board staff plus in excess of 1,300 Primary Care staff by 31st July 2021. 	

PPPAC (21)05	DATE AND TIME OF NEXT MEETING	
	Thursday, 25 th February 2021 at 1 p.m. - Boardroom, Ystwyth Building, Hafan Derwen, St David's Park, Carmarthen	